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By Bonnie A. Anderson [BONNIE A. ANDERSON]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	Group Art Unit: Unknown
MOISES CALDERON	)	Examiner: Unknown
Serial No.: Unknown	)	
Filed: Concurrently Herewith	)	
For: LOW FLOW ATRIAL-ARTERIAL	)	
SHUNT FOR PUMP-ASSISTED	)	
MYOCARDIAL	)	
REVASCULARIZATION WITHOUT	)	
CARDIOPULMONARY BYPASS	)	

INFORMATION DISCLOSURE STATEMENT  
PURSUANT TO 37 C.F.R. § 1.56

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.56, the following patents (copies of which are enclosed) are submitted to the Examiner for consideration:

<u>U.S. Pat. No.</u>	<u>Patentee</u>	<u>Issue Date</u>
5,743,845	Runge	April 28, 1998

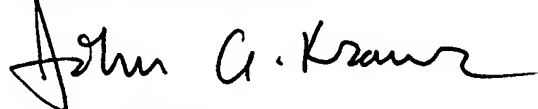
Other Documents

Michael S. Sweeney, MD and O.H. Frazier, MD, "Device-Supported Myocardial Revascularization: Safe Help for Sick Hearts", Ann. Thorac. Surg. 1992; 54: 1065-70.

Applicant is unaware of art any more pertinent to the above-identified application than the patents cited above.

A "List of Prior Art Cited by Applicant" (PTO Form SB/08A) is enclosed for the Examiner's convenience.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John A. Kramer". The signature is fluid and cursive, with the first name "John" being more prominent than the last name "Kramer".

John A. Kramer  
Attorney for Applicant  
Registration No. 46302  
Customer No. 27804  
HOLLAND & BONZAGNI, P.C.  
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Longmeadow, MA 01106-1700  
(413) 567-2076

Date: January 29, 2004

[02082P07]

Substitute for form 1449/PTO

*(Use as many sheets as necessary)*

**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	MOISES CALDERON
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	02082P

Sheet	1	of	2
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[illegible][illegible]

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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By Bonnie Anderson [BONNIE A. ANDERSON]

[02082P07a]

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Substitute for form 1449/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

**Complete if Known**

<b>Sheet</b> 2 <b>of</b> 2	<b>Application Number</b>	
	<b>Filing Date</b>	
	<b>First Named Inventor</b>	MOISES CALDERON
	<b>Art Unit</b>	Unknown
	<b>Examiner Name</b>	Unknown
	<b>Attorney Docket Number</b>	02082P

**NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
		MICHAEL S. SWEENEY, MD AND O.H. FRAZIER, MD, "Device-Supported Myocardial Revascularization: Safe Help for Sick Hearts", Ann. Thorac. Surg. 1992; 54: 1065.70.	

<b>Examiner Signature</b>		<b>Date Considered</b>	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

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[02802P07.b]